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## BIB DATA SHEET

CONFIRMATION NO. 2075

|  |   |   |   |  |                               |                                    |
|--|---|---|---|--|-------------------------------|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/729,035   | <b>FILING or 371(c)<br/>DATE</b><br>12/05/2003<br><b>RULE</b>   | <b>CLASS</b><br>623   | <b>GROUP ART UNIT</b><br>3774   | <b>ATTORNEY DOCKET<br/>NO.</b><br>ECV-5413CIP2CON1 |                               |                                    |
| <b>APPLICANTS</b><br>Alain F. Carpentier, Paris, FRANCE;<br>Stefan G. Schreck, Vista, CA;<br>Richard S. Rhee, Diamond Bar, CA;<br>Diana Nguyen-Thien-Nhon, Santa Ana, CA;<br>Hung Ly Lam, Norco, CA;<br>William Recktenwald, Clarence Ctr., NY;                              |   |   |   |  |                               |                                    |
| <b>** CONTINUING DATA *****</b><br>This application is a CON of 09/847,930 05/03/2001 PAT 6,736,845<br>which is a CIP of 09/332,759 06/14/1999 PAT 6,558,418<br>which claims benefit of 60/117,445 01/26/1999  |   |   |   |  |                               |                                    |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |   |   |  |                               |                                    |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>03/08/2004   |   |   |   |  |                               |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /AMANDA H<br>WALKER/<br>Acknowledged Examiner's Signature |   | <input type="checkbox"/> Met after Allowance<br>AHW<br>Initials | <b>STATE OR<br/>COUNTRY</b><br>FRANCE   | <b>SHEETS<br/>DRAWINGS</b><br>29                   | <b>TOTAL<br/>CLAIMS</b><br>30 | <b>INDEPENDENT<br/>CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>EDWARDS LIFESCIENCES CORPORATION<br>LEGAL DEPARTMENT<br>ONE EDWARDS WAY<br>IRVINE, CA 92614<br>UNITED STATES   |   |   |   |  |                               |                                    |
| <b>TITLE</b><br>Flexible heart valve and associated connecting band  |   |   |   |  |                               |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>1480   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                               |                                    |